



Field Trip Request Form

Date of Request _____ School _____
Grade/Class/Club _____ # of Students _____ # of Chaperones _____
Teacher/Advisor _____
Field Trip To _____
Address _____
Phone# _____ Date of Trip _____
Depart/School _____ Pick-Up Time/Site _____ Return/School _____
Curricular Objectives/Standards to be Achieved: _____

☐ Walk ☐ # of Bus(s) _____ Total Cost of Bus(s) _____
☐ Personal Vehicle Bus Company _____
☐ School Van Ordered By _____

All invoices are to be mailed to Business Services, Attn: Bookkeeper.

Admission Fee _____ Lunch Fee _____ Bus Fee _____
Chaperones pay their own admission fee: ☐ Yes ☐ No Total cost of the Field Trip _____
A background check is required for all chaperones by FPS and will be kept on file with Human Resources.
PTO/PTA or _____ will pay for _____
Actual Cost Paid by Student _____ and/or Cost _____ Paid by _____

- ☐ Transportation Account # to be charged _____
- ☐ To be paid by PTO/PTA • The original invoice will be paid by Business Services. The school will deposit the check from the PTO/PTA into the General Account.
- ☐ Student Activity • Activity Name _____
(Student Activity check is given to the bus driver the day of the field trip.)
- ☐ Student Activity • Activity Name _____
(Student Activity check to be deposited into the General Account.)
- ☐ Purchase Order • Purchase order will be issued to the bus company.
Account # to be charged _____

Permission slips should NOT be distributed until signed by the school principal.

Principal _____ Date _____